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An Inaugural Dissertation

(On)

Hamorrhoids

For the Degree of Doctor of Medicine

By

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An Inaugural Dissertation  
On Haemorrhoids,

For the Degree of Doctor of Medicine.

In treating this subject, I shall not detain your Gentlemen with many preliminary observations, because I am well assured from your known liberality that you will not suspect doctrines novel, peculiar, or in any degree interesting, from a new student who has only devoted the usual portion of time allotted to him for the study of his profession, and that too under circumstances highly embarrassing, & truly calculated to impede the progress of his pursuits.

The disease, on which I propose to offer a few remarks, has been denominated Haemorrhoids, a term derived from the Greek words Haema Blood and Rhois to flow, which in popular language is usually called Piles.

Dr. Cullen in his nosological arrangements has placed it in his first Class Pyrexia and 38<sup>th</sup> Genus of the 4<sup>th</sup> order Haemorrhagica.

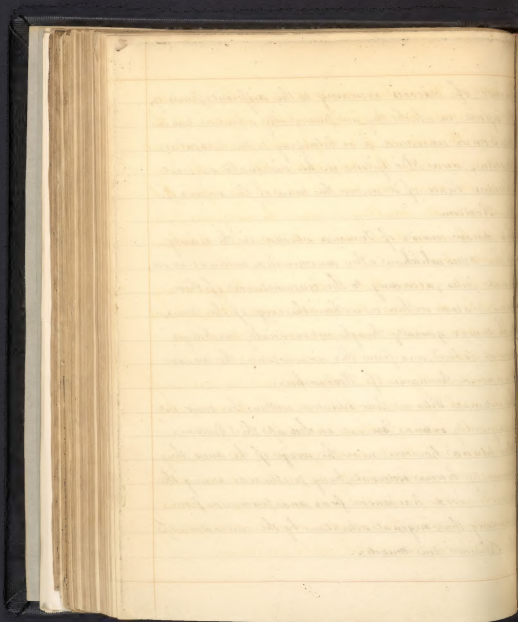
Dr. Chapman, however, in his more correct arrange-



ments of diseases according to the different parts of the system, in which they are principally situated, has in his lectures considered it as belonging to the Vascular System; and Dr. Wilson in his invaluable surgical Lectures treats of it under the head of the diseases of the Rectum.

This disease consists of Tumours situated in the vicinity of the Anus which are either denominated external or internal Piles, according to the circumstances of their being placed within or without the verge of the Anus. Each tumor generally though not invariably discharges maw or lep blood, and from this circumstance the disease has received the name of Hemorrhoids.

The internal Piles or those situated within the Anus not unfrequently extend several inches up the Rectum. When placed however near the verge of the Anus, they frequently become external, being protruded during the effort to void hardness of stool and prevented from assuming their original situation by the contractions of the Sphincter Ani Muscles.

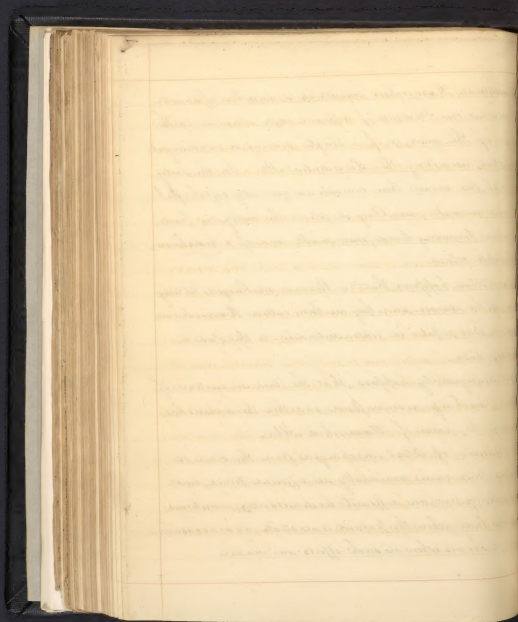


The external Haemorrhoids consists in a number of small spherical or oval tumours of different sizes, situated on the verge of the anus, or of a single tumour surrounding it somewhat resembling the Proctentia Ani. In the early stage of this disease these tumours are generally softish, flabby, and movable, resembling in colour the contiguous parts; but soon becoming hard, immovable, and of a redish or purple colour.

It sometimes happens, that no blood is discharged at any stage of the disease, and they are then called Haemorrhoids Cecae or Blind piles in contradistinction to the open or bleeding Piles.

It not unfrequently happens, that the tumours, instead of blood, discharge a serous fluid, and then the disease has vicaria the name of Haemorrhoids Albae.

The quantity of blood discharged from the open or bleeding piles varies considerably at different times, and is discharged under different circumstances; sometimes it flows freely, when the patient is at stool, and occasionally it occurs when no such efforts are made.

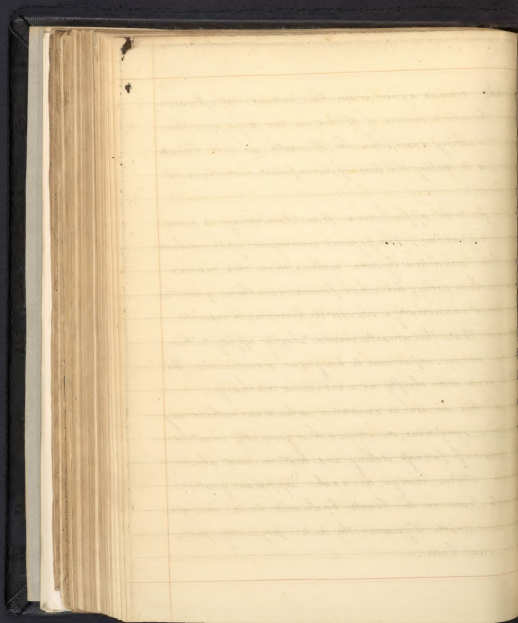




Scalard. records a case, where the patient lost upwards  
of an hundred ounces of Blood in two days, and there  
are not wanting cases, where the Hemorrhages have been so  
profuse, as to destroy the lives of the unfortunate victims of  
this disease.

The danger to be apprehended from Hemorrhage is gene-  
rally in proportion to the frequent recurrence of the disease.  
It has been remarked by some authors, that this disease  
occurs periodically; but what foundation there is for the  
observation, I cannot say; should it, however, be correct,  
I presume that the remark would chiefly apply to those,  
where the disease supervenes to irregular menstruation, &c.  
& may be regarded chiefly as a vicarious discharge.

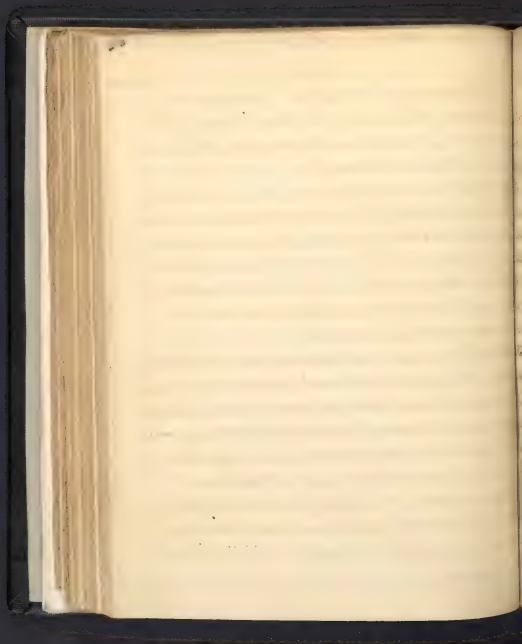
Although this disease is sometimes ushered in without any  
premonitory symptoms, its approach is generally marked  
by a sense of fullness, itching, and heat in and about  
the anus, stiffness, swelling, headache, dyspnoea, gastric  
uneasiness, pain in the bowels, back and loins, and gene-  
rally considerable Pyrexia, the pulse frequently full,  
quick, and hard.



Of the causes of Haemorrhoids. Continues, I am inclined to believe, is one of the principal causes of this disease. The Faeces retained, for some days in the Rectum, accumulating and becoming compact, operate in a two fold manner in the production of Haemorrhoids. In the first place, they produce a local irritation on the parts, and secondly, they mechanically impede the free return of blood from the upper and lower parts of the rectum, thus giving rise to that venous accumulation and distension, which may justly be regarded as the proximate cause of the disease.

We may also add, that the discharge of such hard and bulky faeces sometimes produces a protrusion of the rectum, upon which the Sphincter and Muscles contract so forcibly, as to prevent its return, thus producing a temporary hemorrhoidal tumour, whence the anus, and unduring the parts liable to future attacks of regular Haemorrhoids.

Pregnant women are particularly liable to this disease, from their bowels being generally in a constipated state, but more especially from the pressure of the gravid uterus



in the Rectum.

Inflammation and enlargement of the Spleen, by obstructing the passage of the Blood through the Porta Portae, not infrequently occasions the disease.

The frequent use of drastic purgatives, particularly the sulphurated Alkali preparations, which act principally upon the rectum, are generally considered as contributing to the production of Haemorrhoids.

Riding on horse back and especially on hard trotting horses, by determining the blood to the haemorrhoidal vessels, is occasionally productive of their enlargement.

Haemorrhoids produced in the manner we have mentioned occurs for the most part as a local affection; but by frequent recurrence the disease becomes habitual, and forming many associations with other parts of the system, such a train of sympathetic connections is established, as to justify a quies for the disease a constitutional character.

In this sympathetic range, the Stomach is peculiarly & intimately affected, A disordered state of this organ sometimes announcing an approaching attack of

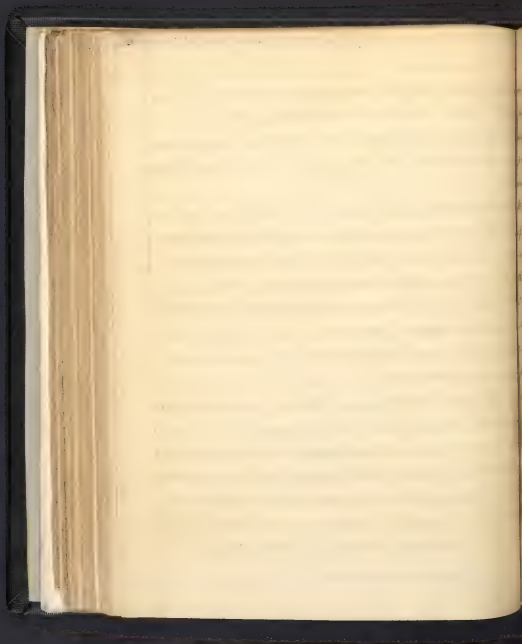


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Hæmorrhoids; and not infrequently this disease assumes  
the genuine character of an Arthritic affection.

Having briefly described the disease and noticed its cause,  
we naturally come to the consideration of its diagnostic symp-  
toms.

The diseases, with which this affection is likely to be confounded,  
are Benignæ tumores and Cancerous excrescences. The true  
Hæmorrhoidal tumours are to be distinguished from Hemorrhoidal tumours,  
by their having a broad base and their rising indiscriminately  
from the verge of the anus and contiguous parts, and not from  
the intestine itself; they are also much flat, and less elongated,  
tender to the touch, though not painful, unless excited by  
irritating applications.

The difficulty of discriminating between Cancerous excres-  
cences and Hemorrhoidal tumours is greater, as they are  
both painful, indurated, and swollen; the Cancerous excres-  
cences discharging disagreeable smears, which has considera-  
ble resemblance to the mucus discharge arising from the  
head of the hemorrhoidal tumours, and the mucus, &c. &c.  
incontinence; the bases of the Cancerous excrescences are com-





commonly broader haired less compressible, arising higher up  
in the rectum, traversing the whole circumference of the  
intestine, thereby producing such a conformation of the  
parts as to render even the expulsion of the feces difficult,  
which gives to them a somewhat flattened or angular form.  
It sometimes, however, happens, that in cancerous affections  
of the Rectum the tumours have a softish, spongy appearance;  
somewhat fleshy feel, attended with an increasing pain in  
the affected part, with shooting pains in the lumbar regions.  
In Hemorrhoidal tumours, although the pain is violent,  
it is not unremitting; both complaints are relieved by an enema  
Emula; but in cancerous complaints the relief is more tem-  
porary and less effectual; the painful sensations of these  
two affections materially differ in any measure of  
Lacerating in the Cancerous.

There is little danger of confounding the proctitis and  
with Hemorrhoids, as the former is only the protrusion of the  
intestine itself, whilst the latter consists in a distension of  
the vessels of the part protruded without the verge of the  
anus, and generally in the form of distended flatness or

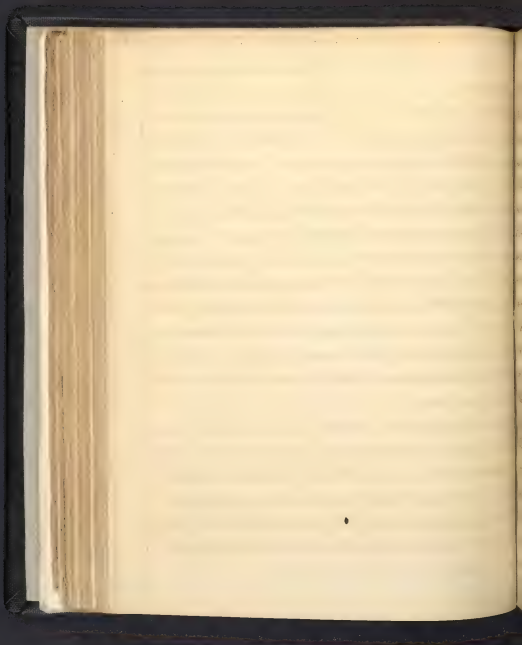


et cetera.

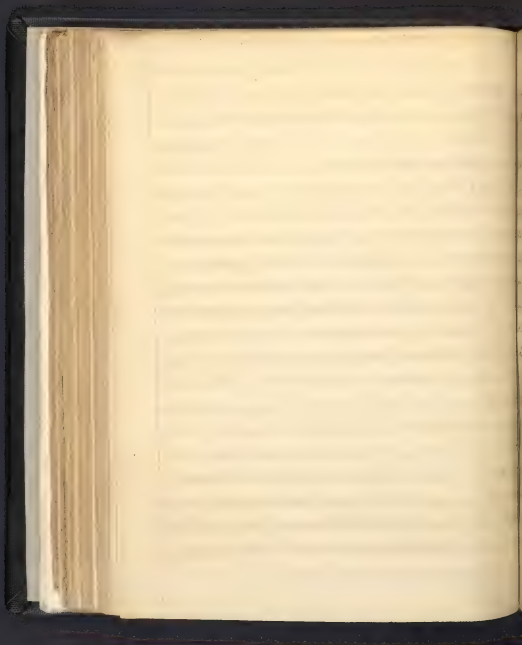
Although it is an acknowledged fact, that Hemorrhoids, for the most part, is a disease not immediately dangerous; yet it must be admitted, that when neglected or mis-treated, it not infrequently becomes a prolific source of suffering to the patient and truly embarrassing to the practitioner.

In a curative point of view therefore this disease justly demands our most serious attention. Previously, however, to entering upon its treatment, we shall offer a few prophylactic remarks. When an attack of Local Hemorrhoids is apprehended the various exciting causes, such as constipation, riding, horse trotting, fires, alcohol, purges, secretions, habits, cold suddenly applied, and other like causes, should be most sedulously avoided.

Frequently Hemorrhoids are apt to occur as a concomitant or consequence of some other disease, or affections of the stomach, liver, and sometimes from a hereditary condition of the system. In all such cases the primary complaint must be removed or mitigated, as a preliminary measure to any locally relieving the hemorrhoidal affections.



*Treatment* A Physician is rarely called a consultant in this complaint, until the disease has arrived at that state, in which it will be highly necessary to enjoin on the patient strict confinement in Bed in a recumbent position, and to advise abstinence from all kinds of a heating or stimulating quality, and to take such nourishment only as is of a light and laxative character. Should the disease have proceeded from a prostatic and it will be necessary immediately, if practicable, to remove the intestines and, with its resection, the hemorrhoidal Tumours generally subside. Sometimes, however, the prostatic portion of intestine is in so debilitated or diseased condition, that active and stimulating remedies must be administered with caution and generally. The inhalation of Kéno, & Hume, the extract of Pessimonia, may be advantageously taken, and injections applied of cold water, super acetate of lead, Sulphate of Lime, decoctions of oak Bark, Pessimonia, or Pauzan Bark, or pledgets of Linseed oil or oil of Juniper. Use with some one of these liquids applied directly over the anus and supported by the T bandages; after each fecal evacuation, should the intestine, be protruded, give ease



ought to be taken to immediately remove it.

When Hemorrhoidal tumours appear externally as a local inflammation, the more speedy and effectual remedy, which can be used to subvert the inflammatory action is the application of leeches to the seat of the disease, repeating the application as often as the urgency of the symptoms may require their use. Leeches not only reduce the size of the tumour and remove the inflammation, but tend essentially to relieve the pain, & suffering of the patient. From what I have read and seen, I am well convinced, that venesection has been too much neglected in cases of Hemorrhoids, accompanied with general fulness of the system. This neglect has probably arisen from the apparent local nature of the complaint, accompanied by the belief, that the very small quantity of blood, which, in a general plethora, would be taken, did the, from the diseased part itself, could not materially influence its state. The fallacy of this belief, however, must be obvious, when we reflect, that the expected advantage does not arise so much from the mere loss of blood, as from the subsidence of the state of general vascular irritation, which frequently accompanies

R Potassa Superfudisti ℥j  
Florem Sulphuris ℥j  
Misturæ Potassa ℥ij Misce



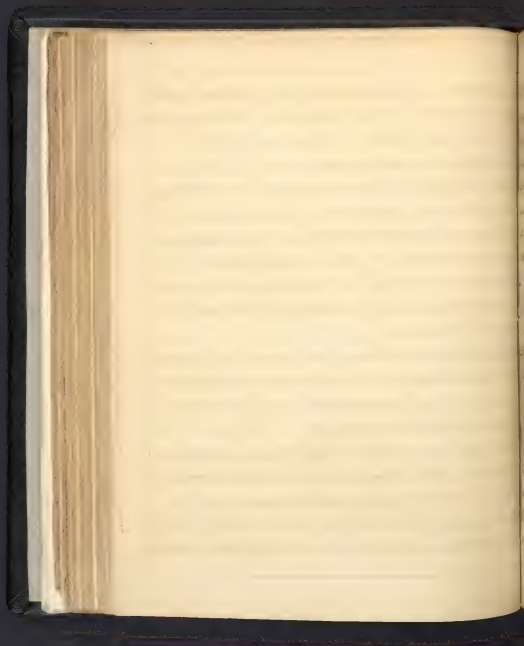
this disease, one which has a direct tendency to determine  
the blood to the affected part.

As cathartics not only increase the complaint, but necessarily  
aggravate & perpetuate it, Purgatives should be employed in  
the very commencement of the disease and they should generally  
be of the mildest kind, it sometimes however becomes necessary,  
in consequence of the obstinately constipated condition of the bow-  
els, to resort to more active medicines, such as Calomel combined  
with Rhubarb, Jallop, or Castor Oil. And more often the Calo-  
mel alone will be found amply sufficient. When the bowels have  
been fully emptied of their fecal contents, they may be kept  
efficiently open by small frequently repeated doses of Elix.  
in what I have found to answer the purpose exceedingly well  
and the following formula, viz.

- |                          |        |
|--------------------------|--------|
| i. Polachæ Super. Tartar | ʒi     |
| Haar Sulphuris           | ʒi     |
| Mixturâ Polachæ          | ʒij M. |

Of which one or two tea spoon fulls may be taken every 3 or 4  
hours in the day according to circumstances.

Reps. Mac. and Meloches has been found by Dr. Phipps



to be an article of diet or location highly essential in the treatment of this disease; the main care it has entirely subjected the necessity of using Quaker Medicine.

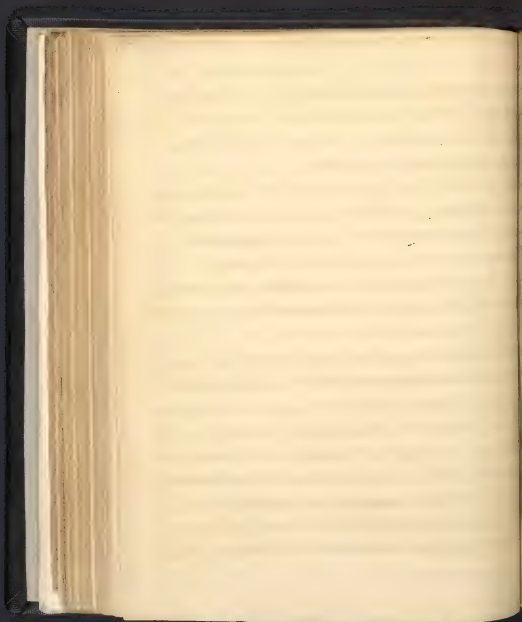
The inflammatory symptoms being pretty diminished and the tenderness of the Tumors considerably abated, The Unguentum Salicinum or Unguentum e Gallis with the addition of Laudanum or Dover's powder are sometimes highly efficacious in removing the remains of the disease.

Unguent or Plasters of the various Natives have been found something more useful, particularly the extract of Licorice and Stramonium.

It sometimes happens, that after these various means have been faithfully adopted the Menstruoidal humor still continues undiminished and troublesome and requires for their complete eradication, a surgical operation.

No intelligent surgeons unite in recommending their extraction, but no little contrariety of opinion prevails as to the mode to the best mode of accomplishing it.

Without entering into a full discussion of the different merits of the various operations proposed by different Surgeons,



I shall briefly notice those, which have received the sanction of some of the highest authorities & good physicians.

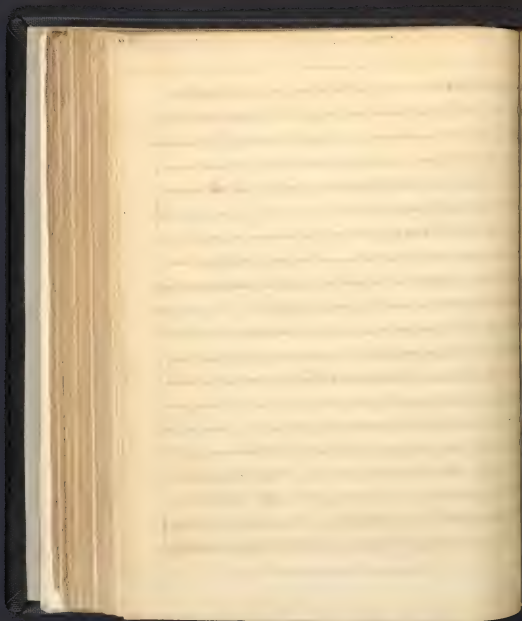
Mr. Astruc recommends the use of the knife as equally safe, and as much less painful than any other method.

Mr. Leake thinks, that the pain is occasioned by one or two tumours smaller and less prominent than the rest, and therefore a device, to be pulled down with a hook and cut off with the scissor.

Mr. Pott recommends the application of a ligature to only one tumour at a time, ~~and~~ <sup>to be</sup> drawn so tight as effectually to cut off the circulation and thereby, curing the vitality of the tumour.

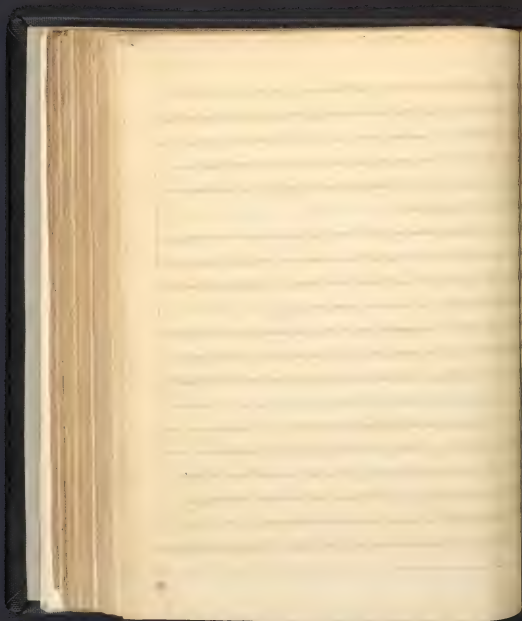
Dr. Sympson, however, recommends the application of a wire and double Canula drawn so tight as to accomplish the same purpose in the space of 24 hours; the wire and canula is then removed, and the tumour drops off in a few days. under the application of a soft poultice of bread and milk.

This operation I should undoubtedly prefer because it does not subject the patient to danger from hemorrhage, whereas the operations of Mr. Astruc and Mr. Leake certainly do, and I should prefer it to Mr. Pott's, because the same end



is accomplished in so much shorter time, and with infinitely less pain to the unfortunate subject of the malady; Should the base of the tumour, however, be too large to admit the application of a single ligature on the underside (anus), a needle armed with a double ligature should be carried through ~~the~~ base, & each half tightly included in its respective ligature, when the separation will be effected in the manner already described.

We now come to the consideration of the internal piles. Some writers have doubted the propriety of checking the hemorrhage in this complaint, under the impression, that it is a salutary discharge; because in some cases of disease it has had a beneficial tendency. Of its beneficial effects in many instances there can be no doubt; When the disease however is entirely to eat, and there does not appear to be any preterious condition of the system, the propriety of checking the hemorrhage may be regarded precisely in the same light as arresting Epistaxis, Hematemesis, Hemoptysis, uterine Hemorrhage, or any other hæmorrhagic flow of Blood. When this disease has established intimate morbid relations with other parts of the system; the propriety of checking

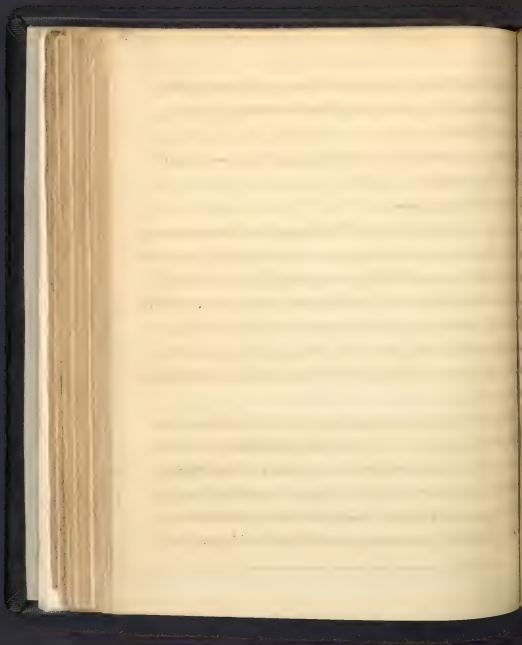




the hemorrhage is more questionable; but when we reflect, that in some cases, the discharge of blood has been so profuse, as even to destroy the life of the patient, we are indisputably led to the conclusion, that it is at least our duty to moderate the discharge when excessive and ultimately to prevent its return.

Even in those cases of the disease consequent on irregular menstruation, should the discharge appear dangerous to the general health of the patient, there would be no impropriety in arresting its progress.

When the disease is profuse, and the discharges of blood not considerable, little else will be required, than to keep the bowels in a loose or soluble condition and attend strictly to the diet of the patient. When the pain and irritation are considerable, it is frequently necessary to attract blood. Great relief may often be obtained by the administration of 50 or 60 drops of Balsam of Capivi or Spirits of Turpentine every morning and evening. Narcotic Medicines have been highly recommended for the relief, &c. cure of this disease. Quinine is, in the hands of every practitioner,

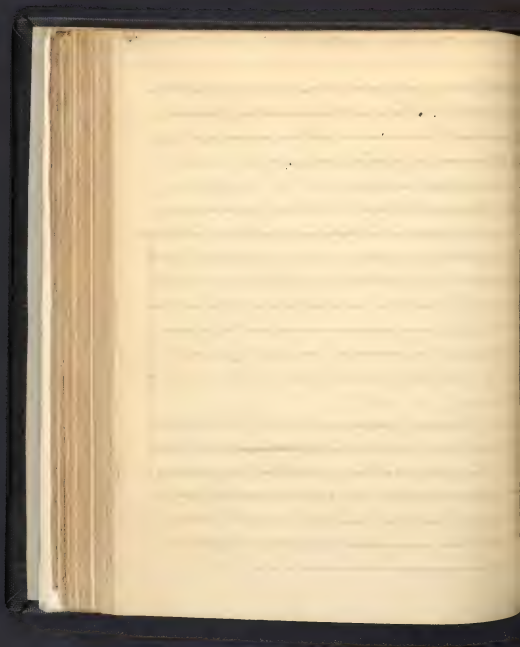


and the claims of digitalis in the dose of 35 drops of the  
Tincture morning and evening have been strongly urged by  
Dr. McLean.

Terres and Colicintemacis are frequently indicated, and  
the Peruvian Bark and Aloes have been found to answer the  
purpose in most cases.

In very alarming cases of Hemorrhage from Hemorrhoidal  
tumors, we should endeavor to restrain it by injecting into  
the rectum solutions of Supercarbonate of Lead or Alum,  
or the decoctions of oak or Pissinimum bark, or should these  
fail, by introducing a large bougie, or a piece of Riggs or  
sheep intestine tied at one end, then inject into it cold wine  
of oak and water so as to make strong & uniform pressure on  
the rectum.

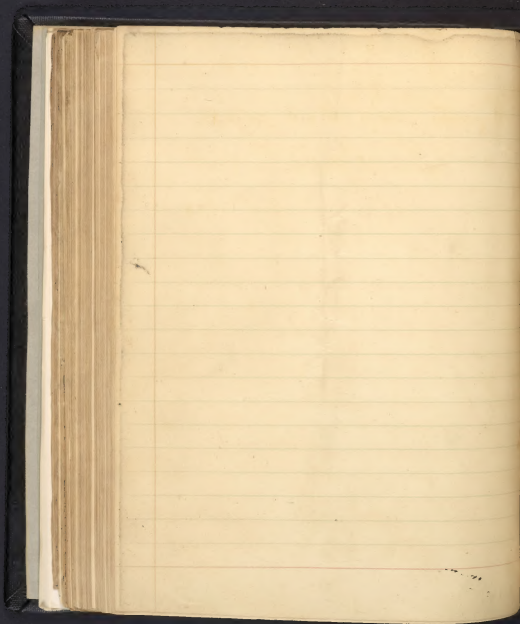
These several means, having been resorted to ineffectually in  
a case, which menaced the life of the patient, I was in-  
duced, from a knowledge of its effects in Hemorrhoids  
Hematemesis, & Menstrual Hemorrhage to try the powers of  
the Sugar of Lead & I have the pleasure to state, that  
the extriments mentioned in the Hospitalist recited; the



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hemorrhage being restrained in a very short time. It was  
given, to the best of my recollection, in doses of about  
3 grains of the Supracetate of Lead, combined with  $\frac{1}{2}$  gr  
of Meac and  $\frac{1}{2}$  gr of Opium every half hour until  
the hemorrhage was arrested.

When the disease has arrived at that stage as to involve  
the general system in its consequences, we should enter upon  
the treatment of it with great caution; we should direct  
our attention, in the first place, to the diet, exercise and  
bowels of the patient—vigilance and assistance to the antiphlo-  
gistic regimen, very moderate exercise and the frequent  
exhibition of purgative medicines will be required pre-  
viously to our expecting much benefit from local applica-  
tions.

A mild Pyloric, gradually induced and continued  
for some time, has been found ~~incurable~~ in cases  
where hemorrhoids has been cured after long standing.  
Some Physicians have also advised in such cases, a  
change of habits and removal to another climate  
We have thus endeavored, imperfectly we confess, to



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fulfill the duty assigned us and upon reviewing our labors  
there remains but a faint hope, that we have accomplished  
our object; the gratification of the Medical Faculty of  
the University of Pennsylvania

Thos P Hoge

